

ANNUAL SUBJECT INDEX OF ARTICLES

JANUARY THROUGH DECEMBER 1981

Each listing shows the title of a major article or short article, the latter in italics. The first two figures following the title indicate the date of the issue, and the last figure indicates the number of the page upon which the article begins. MEDICAL ECONOMICS will send physicians

any three articles listed below without charge. Copies of additional articles are priced at \$1.00 each, and, as long as the supply lasts, whole copies of the magazine (including any of our special issues) may be purchased for \$3.00 each from the Reader Service Department.

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When impotence is due to androgenic deficiency.

Android® 5/10/25
Methyltestosterone U.S.P. Tablets

A well absorbed oral androgen.

Additional indications: Replacement therapy. When androgen deficiency is the cause of male climacteric/eunuchism, eunuchism/post-puberal cryptorchidism.



DESCRIPTION: Methyltestosterone is 17 β -Hydroxy-17-Methyl-androst-4-en-3-one. **ACTIONS:** Methyltestosterone is an oil soluble androgenic hormone. **INDICATIONS:** In the male: 1. Eunuchism and cryptorchidism. 2. Male climacteric syndrome when there is secondary to androgen deficiency. 3. Impotence due to androgenic deficiency. 4. Post-puberal cryptorchidism with evidence of hypogonadism. Cholestatic hepatitis with jaundice and altered liver function tests, such as increased BSP retention, and rises in SGOT levels, have been reported after Methyltestosterone. These changes are often to a lesser degree than those seen in the presence of any changes in liver function tests, drugs should be discontinued. **PRECAUTIONS:** Prolonged dosage of androgen may result in sodium and fluid retention. This may present a problem, especially in patients with compromised cardiac reserve or renal disease. In treating males for symptoms of climacteric, avoid the tendency to the extent of increasing the nervous, mental, and physical activities, which may reduce cardiovascular capacity. **CONTRAINDICATIONS:** Contraindicated in persons with known or suspected carcinoma of the prostate and in carcinoma of the male breast. Contraindicated in the presence of severe liver damage. **WARNINGS:** If priapism or other signs of excessive sexual stimulation develop, discontinue therapy. In the male, prolonged administration or excessive dosage may cause inhibition of testicular function, with resultant oligospermia and decrease in ejaculatory volume. Use cautiously in young boys to avoid premature epiphyseal closure or precocious sexual development. Hyperandrogenism and gynecomastia may occur rarely. PSS may be observed in patients taking androgen. Hyperglycemia may occur during oral therapy for metastatic breast carcinoma. If this occurs, the drug should be discontinued. **ADVERSE REACTIONS:** Cholestatic jaundice • Oligospermia and decreased ejaculatory volume • Hypercalcemia particularly in patients with metastatic breast carcinoma. This usually indicates progression of bone metastases. • Sodium and water retention. • Priapism • Irritation in female patients • Hyperandrogenism and gynecomastia. **DOSAGE AND ADMINISTRATION:** Dosage must be strictly individualized, as patients vary widely in requirements. Daily requirements are best administered in divided doses. The following is suggested as an average daily dosage guide. In the male: Eunuchism and cryptorchidism, 10-20 mg. Male climacteric symptoms and impotence due to androgen deficiency, 10-20 mg. Postpuberal cryptorchidism, 30 mg. **REFERENCE:** R. B. Greenblatt, M.D.; R. Witherington, M.D.; I. B. Siperstein, M.D.: Hormones for Improved Sexuality in the Male and the Female Climacteric. *Drug Therapy*, Sept. 1976. **SUPPLIED:** 5, 10, 25 mg. in bottles of 60, 250. Rx only.

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THE BROWN PHARMACEUTICAL CO., INC.
2600 West Sixth Street, Los Angeles, California 90007



Empirin® with Codeine Tablets

DESCRIPTION: Each tablet contains aspirin (acetylsalicylic acid) 325 mg plus codeine phosphate in one of the following strengths: No. 2-15 mg, No. 3-30 mg, and No. 4-60 mg. (Warning—may be habit-forming.)

Empirin with Codeine has analgesic, antipyretic and anti-inflammatory effects.

CONTRAINDICATIONS: Empirin with Codeine is contraindicated under the following conditions:

- (1) hypersensitivity or intolerance to aspirin or codeine.
- (2) severe bleeding, thrombocytopenia, or coagulation in primary hemostasis, including hemophilia, hypoprothrombinemia, von Willebrand's disease, the thrombocytopenic thrombasthenia and other ill-defined hereditary platelet dysfunctions, as well as such associated conditions as severe vitamin K deficiency and severe liver damage.
- (3) anticoagulant therapy.
- (4) peptic ulcer or other severe gastrointestinal lesions.

WARNINGS: Therapeutic doses of aspirin can cause anaphylactic shock and other severe allergic reactions. A history of allergy is often lacking.

Significant bleeding can result from aspirin therapy in patients with peptic ulcer or other gastrointestinal lesions, and in patients with bleeding disorders. Aspirin administered preoperatively may prolong the bleeding time.

In the presence of head, may of other intra-cranial lesions, the respiratory depressant effects of aspirin may be enhanced, as well as its capacity to elevate cerebrospinal fluid pressure. Narcotics, as well as their capacity to depress CNS depressant effects, such as drowsiness, may further obscure the clinical course of patients with head injuries.

Codeine or other narcotics may obscure signs on which to judge the diagnosis or clinical course of patients with acute abdominal conditions.

PRECAUTIONS:

General: Empirin® with Codeine should be prescribed with caution for certain special-risk patients such as the elderly or debilitated, and those with severe impairment of renal or hepatic function, coronary disease, gallbladder disease, hypertension, myocardial infarction, arrhythmias, intestinal disorders of the gastrointestinal tract, hypothyroidism, Addison's disease, prostatic hypertrophy or urethral stricture, coagulation disorders, head injuries, or acute abdominal conditions. Empirin® with Codeine should not be prescribed for long-term therapy unless specifically indicated.

Precautions should be taken when administering salicylates to persons with known allergies. Hypersensitivity to aspirin is particularly likely in patients with nasal polyps, and relatively common in those with asthma.

Drug interactions: Empirin® with Codeine may enhance the effects of monoamine oxidase inhibitors, and anticoagulants, oral antidiabetic agents and 6-mercaptopurine, and may contribute to the development of nausea, non-steroidal anti-inflammatory agents, other narcotic analgesics, alcohol, general anesthetics, tranquilizers such as chlorpromazine, sedative-hypnotics, or other CNS depressants, causing increased CNS depression, and corticosteroids.

Empirin® with Codeine may diminish the effects of:

- (1) uricosuric agents such as probenecid and sulfapyrazone, reducing their effectiveness in the treatment of gout. Aspirin competes with these agents for protein binding sites.

Aspirin and its metabolites may be caused to accumulate in the body, perhaps to toxic levels, by para-aminosalicylic acid, ibuprofen, and vitamin C.

Pregnancy: Teratogenic Effects: Pregnancy Category C. Animal reproduction studies have not been conducted with Empirin® with Codeine. It is also not known whether Empirin with Codeine can cause fetal harm when administered to a pregnant woman or can affect reproduction capacity. Empirin with Codeine should be given to a pregnant woman only if clearly needed.

Reproductive studies have been performed in rabbits and rats at doses up to 150 times the human dose and have revealed no evidence of impaired fertility or harm to the fetus due to codeine.

Non-teratogenic Effects: Therapeutic doses of aspirin in pregnant women close to term may cause bleeding in mother, fetus, or neonate. During the last months of pregnancy, regular use of aspirin at high doses may prolong pregnancy and delay delivery in the neonate.

Labor and Delivery: Ingestion of aspirin prior to delivery may prolong delivery or lead to bleeding in the mother or neonate. Use of codeine during labor may lead to respiratory depression in the neonate.

Nursing Mothers: Aspirin and codeine are excreted in breast milk in small amounts, but the significance of their effects on nursing infants is not known.

Decisions to the potential for serious adverse reactions in nursing infants from Empirin® with Codeine, a decision should be made whether to discontinue nursing or to discontinue the drug, taking into account the importance of the drug to the mother.

ADVERSE REACTIONS:

Codeine: The most frequently observed adverse reactions to codeine include light-headedness, dizziness, drowsiness, nausea, vomiting, constipation and depression of respiration. Less common reactions to codeine include euphoria, dysphoria, pruritis, and skin rash.

Aspirin: Mild aspirin intoxication (salicylism) can occur in response to chronic use of large doses. Manifestations include headache, vomiting, hearing impairment, tinnitus, diarrhea, rectal bleeding, epigastric distress, abdominal cramps, hypertension, hyperventilation, tachycardia, sweating and thirst.

Therapeutic doses of aspirin can induce mild or severe allergic reactions manifested by skin rash, urticaria, angioedema, rhinitis, asthma, abdominal pain, nausea, vomiting, or anaphylactic shock.

Some patients develop nausea or vomiting. Occasional patients respond to large doses with dyspepsia or heartburn, which may be accompanied by occult bleeding. Excessive bruising or bleeding is sometimes seen in patients with coagulation disorders, particularly those with hemophilia or Factor VIII deficiency.

Prolonged use of aspirin can cause peptic ulcer disease. High doses of aspirin can exacerbate symptoms of peptic ulcer and, occasionally, cause extensive bleeding.

Excessive bleeding can follow injury or surgery in patients with or without known bleeding disorders who have taken therapeutic doses of aspirin within the preceding 10 days.

Aspirin has been reported in association with prolonged use of large doses of aspirin in patients with lupus erythematosus, rheumatoid arthritis and rheumatic disease.

Bone marrow depression, manifested by weakness, fatigue, or abnormal bruising or bleeding, has occasionally been reported.

In patients with glucose-6-phosphate dehydrogenase deficiency, aspirin can cause a mild degree of hemolytic anemia.

In hypothyroidic patients, low doses of aspirin may reduce the effectiveness of oral thyroid therapy or precipitate an attack of goit.

DOSE AND ADMINISTRATION: Dosage should be individualized according to the severity of pain and the response of the patient. It may occasionally be necessary to exceed the usual dosage recommended below when pain is severe or the patient has become tolerant to the analgesic effect of codeine. Empirin® with Codeine is given orally. The usual adult dose for Empirin with Codeine No. 2 and No. 3 is one or two tablets every four hours as required. The usual adult dose for Empirin with Codeine No. 4 is one tablet every four hours as required.

Empirin® with Codeine should be taken with food or a full glass of milk or water to lessen gastric irritation.



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